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Date:	March 8, 2005		
To:	U.S. Patent and Trademark Office	Fax Telephone #:	703-872-9306
		Office Telephone #:	
From:	Jon W. Hallman	Date Sent:	
Subject:	Applicant: Lane W. Lee et al. Serial No. 09/939,960	Time Sent:	
Client/File:	M-12043 US	Fax Operator:	

This transmittal consists of 12 total page(s), including this cover sheet.

Message:

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Lane W. Lee et al.

Assignee: DPHI Acquisitions, Inc.

Title: Mastering Process And System For Secure Content

Serial No.: 09/939,960

Filing Date: August 27, 2001

Examiner: Bradley B. Bayat

Group Art Unit: 3621

Docket No.: M-12043 US

Confirmation No. 6648

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COMMISSIONER FOR PATENTS

Mail Stop Amendment

P.O. Box 1450

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OFFICIAL COMMUNICATION**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the following Request for Continued Application (1 page), Response to Final Office Action (8 pages), and Transmittal Sheet (1 page) are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Dated: March 8, 2005


Jon W. Hallman

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March 8, 2005

Via Facsimile to (703) 872-9306

Mail Stop AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Re: Applicants: Lane W. Lee; Timothy R. Feldman; Douglas M. Rayburn; Gary G. Kiwimagi
 Assignee: DPHI Acquisitions, Inc.
 Title: Mastering Process And System For Secure Content
 Application No.: 09/939,960 Filing Date: August 27, 2001
 Examiner: Bradley B. Bayat Group Art Unit: 3621
 Docket No.: M-12043 US Confirmation No.: 6648

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Certification of Facsimile Transmission (1 page);
- (2) This Transmittal Letter (1 page);
- (3) Request for Continued Application (1 page);
- (4) Response to Final Office Action (8 pages).



No additional fee is required.



The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining <i>After Amendment</i>		Highest No. Previously Paid For		Present Extra	Rate	Additional Fee
Total Claims	_____	Minus	36	=	0	x \$25.00	\$ - 0 -
Independent Claims	_____	Minus	3	=	0	x \$100.00	\$ - 0 -
<input type="checkbox"/> Fee of \$145.00 for the first filing of one or more multiple dependent claims per application							\$
<input type="checkbox"/> Information Disclosure Statement							\$

Total additional fee for this Amendment:

\$

- ☒ Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.

- ☐ Please charge our Deposit Account No. 50-2257 in the amount of \$ - 0 -

- ☒ Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 50-2257

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Jon W. Hallman	March 8, 2005

Respectfully submitted,

Jonathan W. Hallman
 Attorney for Applicants
 Reg. No. 42,622